

PART B - FEE(S) TRANSMITTAL

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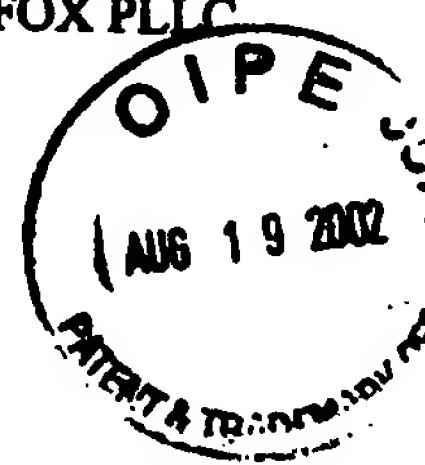
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CONFIRMATION CORRESPONDENCE ADDRESS (use Legacy Trans-10 was my selection in step 1)

7590 07/16/2002

STERNE KESSLER GOLDSTEIN AND FOX PLLC
SUITE 600 1100 NEW YORK AVENUE NW
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	(Depositor's name)
	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/448,868	11/24/1999	JIAN NI	1488.1300004	5546

TITLE OF INVENTION: DEATH DOMAIN CONTAINING RECEPTOR-4 ANTIBODIES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1280	\$0	\$1280	10/16/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
KAUFMAN, CLAIRE M	1646	435-069100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Sterne, Kessler,
1 Goldstein & Fox, P.L.L.C.
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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HUMAN GENOME SCIENCES, INC.

ROCKVILLE, MD

Please check the appropriate assignee category or categories (will not be printed on the patent)

4a. The following fee(s) are enclosed:

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Mailing Fee

A check in the amount of the fee(s) is enclosed.

Publication Fee

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(Authorized Signature)

Elizabeth J. Haanes (Date) August 19, 2002
Elizabeth J. Haanes, Ph.D., Reg. # 42,613

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08/20/2002 CNB1UYEN1 00000087 09448868

01 FC:3142

02 FC:561

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